

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000047166

1. Entity Name

NOTTURNO, INC.

FILED
Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90037 034 ***158.75

Principal Place of Business

761 HARBOUR DRIVE
BOCA RATON FL 33431

Mailing Address

761 HARBOUR DRIVE
BOCA RATON FL 33431-6926



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3919 N.W. 57th Street

Suite, Apt. #, etc.

COCONUT CREEK FL

City & State

33073 USA

Zip

Country

3. Mailing Address

3919 N.W. 57th Street

Suite, Apt. #, etc.

COCONUT CREEK, FL

City & State

33073 USA

Zip

Country

4. FEI Number

65-0933007

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

PUGLIESE, MICHAEL I
3384 CABARET LANE
MARGATE FL 33063

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE PD
NAME DURSO, VITO
STREET ADDRESS 761 HARBOUR DRIVE
CITY-ST-ZIP BOCA RATON FL 33431 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME LOUIS Pugliese
STREET ADDRESS 3919 N.W. 57th ST
CITY-ST-ZIP COCONUT CREEK, FL 33073 ☐ Change ☐ Addition

TITLE VP
NAME Frances Pugliese
STREET ADDRESS 3919 N.W. 57th ST.
CITY-ST-ZIP COCONUT CREEK, FL 33073 ☐ Change ☐ Addition

TITLE S
NAME ROSANNA Aiello
STREET ADDRESS 3919 N.W. 57th ST
CITY-ST-ZIP COCONUT CREEK, FL 33073 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR 21 0012 01/1/00